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APPLICANTS

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** CONTINUING DATA ***** *WJ*** FOREIGN APPLICATIONS ***** *WJ*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TN	SHEETS DRAWING 12	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>W. A. Nelson</i> Examiner's Signature	<i>WJ</i> Initials			

ADDRESS

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TITLE

Advanced synchronous luminescence imaging for chemical and medical diagnostics

FILING FEE RECEIVED 878	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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